

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s):	Paul A. Worsowicz; Erik W. Tayl Elliott	Paul A. Worsowicz; Erik W. Taylor; Lisa K. Shapiro, Ph.D.; Samantha D. Elliott		
II. Name of Lobbyist's par	tnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & 214 North Main Street, Con			
603-228-1181	603-226-3477	worsowicz@gcglaw.com		
(Telephone)	(Fax)	(Email)		
	(Choose one – file separate reports for ions which are not attributable to any o	each client, OR you may file a separate report for ne client.)		
All reportable transac	tions occurring in the month prior to the r	eporting date relative to the following client.		
	MOTION PICTURE ASSOCIAT			
(F	ull Name of Client as it appears on the Lol	obyist Registration Form)		
All reportable transacture unrelated to any particular to any particular to any particular transacture.		st's family), or the lobbying firm listed below which are		
IV. Date of Report:	April 26, 2017 🗵	July 26, 2017 □		
-	from date of registration to 3/31/17	activity from 4/1/17 to 6/30/17		
	October 25, 2017	January 24, 2018 □		
	ty from 7/1/17 to 9/30/17	activity from 10/1/17 to 12/31/17		
V. There have been no fees If this box is checked, complete Concord, NH 03301.	received and no reportable transaction ete just this form and submit it to the Secre	s made since the last report. Stary of State's Office, State House, Room 204,		
VI. Check if additional rep	oorts are attached:			
	fees or made expenditures, you must file A	Addendum A – Fees and Expenses		
If you have paid an h Expense Reimbursen	nent	ust file Addendum B – Report of Honorariums or		
If you, your firm, or	your family has made political contribution	ns, you must file Addendum C – Political Contributions		
Sworn Statement/Affirmati I have read RSA 15, RSA 15 to the best of my knowledge	-B and RSA 664 and hereby swear or affin	m that the foregoing information is true and complete		
Signature of Lobbyist)	rsowy	(Date)		
Paul A. Worsowicz (Print Name of lobbyist)		RECEIVED		

APR 2 6 2017

NEW HAMPSHIRE DEPARTMENT OF STATE T

P L E A



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Paul A. Worsowicz; Erik W. Taylor; Lisa K.	Shapiro, I	Ph.D.; Sama	ntha D. Elliott
II. Name of lobbyist's partnership, firm or corporation, if any:			
GALLAGHER, CALLAHAN & GARTR	ELL, P.C.		
(Name of partnership, firm or corporation			· <u>·</u>
III. Name of Client MOTION PICTURE ASSOCIATION OF AMERICA	Date	April 26, 2	2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above lobbying, including fees for services such as public advocacy, government re including research, monitoring legislation, and related legal work. The gross by any expenses:	lations, or	public relation	ons services,
a) Total of all fees received in this reporting period		a) \$	10,200.00
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)		b) \$ 	0.00
c) Total of all fees received to date. (Add lines a and b)		c) \$	10,200.00
d) Indicate the amount of any such fees that are due, but have not yet been paid.		d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to fees. Separate reports are to be filed for expenditures made relative to each of lobbyist(s)/firm that are unrelated to any one client a separate report may be are to be reported in one of three categories of expenses: (a) the aggreg reporting period for salaries, benefits, support staff, and office expenses; expenses where the expenditure was of \$25.00 or less (for example: meals the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 purchase of a ceremonial object given to a person being lobbied with a value statement of each individual expenditure made during this reporting period of covered by (a) (for example: purchase of a meal with value of greater than \$25, but not greater to the subject of lobbying with a value greater than \$25, but not greater than \$25, but not greater addendums and should not be reported on Addendum A.	client and it e filed for gate total of (b) the ag purchased that is give the of \$25.0 of greater the eater than	if expenditure the lobbyist() of all expense gregate total during a bus en to the pers 0 or less); a han \$25.00 fo ise of a ceren \$50, restaura	es are made by the s)/firm. Expenses es paid during the l of all individuationess lunch where son being lobbied and (c) an itemized or any purpose no nonial object to be ant expenses for a
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$ b) \$		13,500.00
in a), of \$25 or less.			0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	•	200.00

d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$	13,700.00
e) Total of expenses paid this calendar year, prior to this reporting period. (This should be the amount on line f of addendum A for last month's report.)	e) \$	0.00
f) Total of all expenses year to date.	f) \$	13,700.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying feet period, including by whom paid or to whom charged.	s during this	reporting
Paid to:	Am	ount
State of NH	\$	200.00
	\$	
	\$	·····
	—	
	— ֆ —	
	······································	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the fis true and complete to the best of my knowledge and belief.	oregoing ir	ıformation
Signature of lobbyist) 4-2	20 17 Date)	
Paul A. Worsowicz		
(Print Name of Lobbyist)		
(

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: MOTION PICTURE ASSOCIATION OF AMERICA

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Motion Picture Association of America			
Date of Report (check one):			
April 26, 2017 ✓ July 26, 2017 October 25, 2017 January 24, 2018 □			
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):			
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.			
(Signature of Lobbyist) (Date)			
Erik W. Taylor (Print Name of lobbyist)			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirm Statement of Income an			
Name of Lobbying partner	ership, firm or corporation	on: GALLAGHER, CAL	LLAHAN & GARTRELL, P.C.
	ank if Statement is for the tion Picture Association		rporation and not related to any
Date of Report (check or	ne):		
April 26, 2017 🔀	July 26, 2017 □	October 25, 2017	January 24, 2018 □
		atement of Income and Exnent (insert the number of	xpenses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm complete to the best of m			nd each Addendum is true and
AK &	<u> </u>		4-24-1)
(Signature of Lobbyist)		•	(Date)
Lisa K. Shapiro, Ph.D. (Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income a	•		
Name of Lobbying part	nership, firm or corpora	tion: GALLAGHER, CAI	LLAHAN & GARTRELL, P.C.
•	olank if Statement is for lotion Picture Associate		rporation and not related to any
Date of Report (check o	one):		
April 26, 2017 🔀	July 26, 2017 🏻	October 25, 2017 🗆	January 24, 2018 □
		Statement of Income and Exement (insert the number of	xpenses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
•	n that the foregoing info my knowledge and belie		nd each Addendum is true and
(Signature of Lobbyist)		4/20/17 (Date)
Samantha D. Elliott			